

**Notice to Quit, Health Hazard/Injury to Premises
Landlord-Tenant**

(Form DC 100b)

STATE OF MICHIGAN

NOTICE TO QUIT
HEALTH HAZARD/INJURY TO PREMISES
Landlord-Tenant

TO:

1. Your landlord/landlady, _____, says you have wilfully or negligently caused
Name (type or print)

☐ a serious and continuing health hazard to exist at:

☐ extensive physical injury to:

Address or description of premises rented (if different from mailing address):

Explanation: _____

2. You must do one of the following within seven days from the date this notice was served:

a. remove the health hazard and/or repair the damage.

b. move out.

If you do not do one of the above, your landlord/landlady may take you to court to evict you.

3. If you believe you are not at fault, you may have a lawyer advise you. Call him or her soon.

Date

Address

Signature of owner of premises or agent

City, state, zip

Telephone no.

PROOF OF SERVICE

Name

being duly sworn, says that on _____ s/he served

Date

the above notice on _____

Name

by: ☐ personal service.
☐ substitute service.
☐ first class mail.

Signature

Subscribed and sworn to before me on _____, _____ County, Michigan.
Date

My commission expires: _____ Signature: _____
Date Court clerk/Notary public

Notary public, State of Michigan, County of _____

Court copy (to be copied, if necessary, to attach to the complaint)

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HOW TO GET LEGAL HELP

1. Call your own lawyer.

2. If you have no money for a lawyer, and if there is a legal aid office or clinic in your area, call them or ask Lawyer Referral for the telephone number of the nearest office (legal aid offices should be listed in the yellow pages of your telephone directory).

3. If you do not know a lawyer, you may call the Michigan Lawyer Referral Service at 1-(800) 968-0738.

Tenant's copy